


Substitute for form 1449/PTO INFORMATION DISCLOSURE  STATEMENT BY APPLICANT (use as many sheets as necessary)				COMPLETE IF KNOWN	
Application Number				10/594,835	
Filing Date				September 28, 2006	
First Named Inventor				Coburn, et al.	
Group Art Unit				1649	
Examiner Name				Kolker	
Attorney Docket Number				21538YP	
Sheet	1	of	1		

[illegible]

Examiner Signature		Date Considered	
-----------------------	--	--------------------	--

*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

Computer generated form "IDS Form" (IDS Folder), Merck & Co., Inc., 12/1/2007